

B6F (Official Form 6F) (12/07)

In re **Tamara Sue Crews**Case No. **12-31264**

Debtor

AMENDED SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T O R	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.			2011 Cash Advance				
Allied Cash Advance 6845 Forest Hill Avenue Richmond, VA 23225		-					646.00
Account No. xxxx7280			Opened 8/01/06 Collection Attorney United States Postal Service				
Allied Credit/Alliance One Attn: Bankruptcy Po Box 2449 Gig Harbor, WA 98335		-					67.00
Account No. xxxxxxxxxxxxQQQQ			Med1 Lc3 Laboratory Corp Of Americ				
Amca/American Medical Coll Agency 4 West Chester Plaza Elmsford, NY 10523		-					720.00
Account No. xxxxxxxxxxxxQQQQ			Med1 Lc3 Laboratory Corp Of Americ				
Amca/American Medical Coll Agency 4 West Chester Plaza Elmsford, NY 10523		-					440.00
Subtotal (Total of this page)							1,873.00

9 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxxxxxxxQQQQ		-	Med1 Lc3 Laboratory Corp Of Americ				399.00
Amca/American Medical Coll Agency 4 West Chester Plaza Elmsford, NY 10523							
Account No. xxx xxx8953		-	Chase Bank/ Heritage First USA				9,320.40
Asset Acceptance Po Box 2036 Warren, MI 48090							
Account No. xxxxxxxxxxxxxx7246		-	Med1 02 Bonsecours Physicians Practi				160.00
Berks Cc P.o. Box 329 Temple, PA 19560							
Account No. xxxxxxxxxxxxxx5621		-	Med1 02 Bonsecours Physicians Practi				148.00
Berks Cc P.o. Box 329 Temple, PA 19560							
Account No. xxxxxxxxxxxxxx5622		-	Med1 02 Bonsecours Physicians Practi				104.00
Berks Cc P.o. Box 329 Temple, PA 19560							
Sheet no. <u>1</u> of <u>9</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							10,131.40

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx5050 Bon Secours Richmond Health Systems P. O. Box 404893 Atlanta, GA 30384-4893	-	2009-2011 medical				1,870.77
Account No. Cash-2-U 6100 Midlothian Turnpike Richmond, VA 23225	-	2011 Cash Advance				646.00
Account No. xxxxxxxxxxxxxx5415 Cbe Group 1309 Technology Pkwy Cedar Falls, IA 50613	-	Opened 10/01/07 CollectionAttorney Mci Cnld				26.00
Account No. xxxxxxxxxxxxxx2894 Ccs/cortrust Bank 500 E 60th St N Sioux Falls, SD 57104	-	Opened 2/01/08 Last Active 12/28/11 CreditCard				332.00
Account No. xxxxxxx0019 Charlottesville Bureau Pob 6220 Charlottesvill, VA 22911	-	Opened 8/01/09 CollectionAttorney Commonwealth Lab Consultants				120.00
Sheet no. 2 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,994.77

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx4530 Cntry Door 1112 7th Ave Monroe, WI 53566	-	Opened 10/01/06 Last Active 5/05/08 ChargeAccount				328.00
Account No. 4124 Commonwealth Eye Care Associat 10431 Patterson Avenue Henrico, VA 23238	-	2010 medical				224.00
Account No. xxxxx-xCWR1 Commonwealth Radiology 1508 Willow Lawn dr. Ste. 102 Richmond, VA 23230	-	2011 medical				970.00
Account No. xxxxxxxxxxxx3012 First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104	-	Opened 1/01/02 Last Active 4/03/06 CreditCard				542.00
Account No. xxxxxxxxxxxx1286 Fncc/Legacy Visa Attn: Bankruptcy Po Box 5097 Sioux Falls, SD 57117	-	Opened 8/01/08 Last Active 12/28/11 CreditCard				372.00
Sheet no. 3 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 2,436.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xx0643 Focused Recovery Solut 9701 Metropolitan Ct Ste North Chesterfield, VA 23236	-	Opened 5/01/09 CollectionAttorney Neurological Associates Inc A				39.00
Account No. xxxxxxxxxxxx7328 Hsbc Bank Attn: Bankruptcy Po Box 5213 Carol Stream, IL 60197	-	Opened 9/01/10 Last Active 1/04/12 CreditCard				393.00
Account No. xxxxxxx9001 Ic Systems Inc Po Box 64378 St. Paul, MN 55164	-	Opened 11/01/08 CollectionAttorney Stony Point Surgery Center				360.00
Account No. xxxxxxx9001 Ic Systems Inc Po Box 64378 St. Paul, MN 55164	-	Opened 10/01/11 CollectionAttorney Gastrointestinal Specialists				81.00
Account No. xxxxxxx9001 Ic Systems Inc Po Box 64378 St. Paul, MN 55164	-	Opened 1/01/09 CollectionAttorney Stony Point Surgery Center				77.00
Sheet no. 4 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 950.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxx2450 Labcorp PO Box 2240 Burlington, NC 27216-2240	-	medical				720.14
Account No. xxxxxxxxxxxx0787 Lvnv Funding Llc Po Box 740281 Houston, TX 77274	-	Opened 1/01/09 Last Active 1/27/11 FactoringCompanyAccount Idt-Hsbcorchard Standard - Mcs				2,528.00
Account No. xxxxxx5220 Midland Credit Mgmt In 8875 Aero Dr San Diego, CA 92123	-	Opened 8/01/08 FactoringCompanyAccount Bank Of America				3,752.00
Account No. xxxxxx0164 Midland Credit Mgmt In 8875 Aero Dr San Diego, CA 92123	-	Opened 11/01/06 FactoringCompanyAccount Tribute Mastercard (1474)				1.00
Account No. xxxx# xx0423 Midlothian Medical Care 3000 Watercove Road Midlothian, VA 23112	-	2009-2010 medical				489.20
Sheet no. 5 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 7,490.34

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxxxx4001 Nco Fin /99 Po Box 15636 Wilmington, DE 19850			Opened 5/01/11 CollectionAttorney 06 Nationwide Insurance				195.00
Account No. xxxxx0070 Nco Fin /99 Po Box 15636 Wilmington, DE 19850			Opened 12/01/10 CollectionAttorney 06 Nationwide Insurance				123.00
Account No. xxx5104 Pellettieri 991 Oak Creek Dr Lombard, IL 60148			Med1 02 Bon Secours Richmond Health				171.00
Account No. xxx5791 Pellettieri 991 Oak Creek Dr Lombard, IL 60148			Med1 02 Bon Secours Richmond Health				126.00
Account No. xxx5050 Pellettieri 991 Oak Creek Dr Lombard, IL 60148			Med1 02 Bon Secours Richmond Health				126.00
Sheet no. 6 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							741.00
Subtotal (Total of this page)							741.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxx1752 Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-	Med1 02 Bon Secours Richmond Health				126.00
Account No. xxx1746 Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-	Med1 02 Bon Secours Richmond Health				126.00
Account No. xxx2774 Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-	Med1 02 Bon Secours Richmond Health				126.00
Account No. xxx5787 Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-	Med1 02 Bon Secours Richmond Health				107.00
Account No. xxx8212 Pellettieri 991 Oak Creek Dr Lombard, IL 60148	-	Med1 02 Bon Secours Richmond Health				100.00
Sheet no. <u>7</u> of <u>9</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 585.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. xxx9363		-	Med1 02 Bon Secours Richmond Health				93.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148							
Account No. xxx9366		-	Med1 02 Bon Secours Richmond Health				4.00
Pellettieri 991 Oak Creek Dr Lombard, IL 60148							
Account No. xxxxxxA679		-	2011 medical				116.92
Powhatan Medical Associates P>O. Box 843356 Boston, MA 02284-3356							
Account No. xxx3897		-	Opened 8/01/11 CollectionAttorney Check Smart (5622)				1.00
Prof PI Svc Attn: Crissy Po Box 612 Milwaukee, WI 53201							
Account No. xxxxxxxxxxxxx7181		-	Opened 11/01/10 CollectionAttorney Medical Payment Data				724.00
Receivable Management 7206 Hull Street Rd Ste North Chesterfield, VA 23235							
Sheet no. <u>8</u> of <u>9</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							938.92
Subtotal (Total of this page)							

B6F (Official Form 6F) (12/07) - Cont.

In re **Tamara Sue Crews**

Case No. **12-31264**

Debtor

AMENDED
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. xxxxxxxxxxx1090 Rjm Acq Llc 575 Underhill Blvd Ste 2 Syosset, NY 11791	-	Opened 10/01/08 FactoringCompanyAccount Target Stores - Retailers Nati				75.00
Account No. xxxxx4303 St. Francis Hospital P O Box 79214 Baltimore, MD 21279	-	3/14/2011 medical				151.33
Account No. xxxx0078 United Collect Bur Inc 5620 Southwyck Blvd Ste Toledo, OH 43614	-	Opened 3/01/11 CollectionAttorney Professional Emergency Care				326.00
Account No. xxxx8702 United Collect Bur Inc 5620 Southwyck Blvd Ste Toledo, OH 43614	-	Opened 12/01/10 CollectionAttorney Professional Emergency Care				326.00
Account No. xx1237 Virginia Surgical Associates 417 Libbie Ave. Richmond, VA 23226	-	2011 medical				110.00
Sheet no. 9 of 9 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 988.33
(Report on Summary of Schedules)						Total 29,128.76

United States Bankruptcy Court
Eastern District of Virginia

In re Tamara Sue Crews

Debtor(s)

Case No. 12-31264
Chapter 13

AMENDMENT COVER SHEET

Amendment(s) to the following petition, list(s), schedule(s) or statement(s) are transmitted herewith:

- ☐ Involuntary/Voluntary Petition [Specify reason for amendment: ____]
Check if applicable: ☐ Soc. Sec. No. amended. [If applicable: An original, signed Official Form 21 was marked/hand-delivered to the Clerk's office on ____.*]
- ☐ Summary of Schedules (Includes Statistical Summary of Certain Liabilities and Related Data)
- ☐ Schedule A - Real Property
- ☐ Schedule B - Personal Property
- ☐ Schedule C - Property Claimed as Exempt
- ☒ **Schedule D, E, or F, and/or list of Creditors or Equity Holders - REQUIRES COMPLIANCE WITH LOCAL RULE 1009-1 (\$30.00 fee required if adding or deleting pre-petition creditors, changing amounts owed or classification of debt.) Check applicable statement(s):**
- ☒ **Creditor(s) added** ☐ **Creditor(s) deleted**
- ☐ **Change in amounts owed or classification of debt**
- ☐ **No pre-petition creditors added/deleted, or amounts owed or classification of debt changed.** [Docket: Amended Schedule(s) and/or Statement(s), List(s)-NO FEE]
- ☐ **Post-petition creditors added (Schedule of Unpaid Debts)**
- REMINDER: Conversion of Chapter 13 to Chapter 7 - only file Schedule of Unpaid Debts.**
- ☐ Schedule G- Executory Contracts and Unexpired Leases
- ☐ Schedule H - Codebtors
- ☐ Schedule I - Current Income of Individual Debtor(s)
- ☐ Schedule J - Current Expenditures of Individual Debtor(s)

[NOTE: The form "NOTICE TO CREDITOR(S) (RE AMENDMENT)" is still required when adding or deleting creditors.

*Amendment of debtor(s) Social Security Number requires that a hard copy of this cover sheet together with a completed Official Form 21 - Statement of Social Security Number(s) be submitted to the Clerk's Office for entry of the amended Social Security Number into the Court's database.]

- ☐ Statement of Financial Affairs
- ☐ Chapter 7 Individual Debtor's Statement of Intention
- ☐ Chapter 11 List of Equity Security Holders
- ☐ Chapter 11 List of Creditors Holding 20 Largest Unsecured Claims
- ☐ Disclosure of Compensation of Attorney for Debtor
- ☐ Other: ____

NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Federal Rule of Bankruptcy Procedure 1009(a) and Local Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the United States Trustee, the trustee in this case, and to any and all entities affected by the amendment as follows: ____.

Date: October 16, 2012

/s/ Nnika E. White, Esq.

Attorney for Debtor(s) [or Pro Se Debtor(s)]

State Bar No.: **47012**

Mailing Address: **The Law Offices of White & Associates, PC**
2505 Pocoshock Place
Suite 301
Richmond, VA 23235

Telephone No.: **(804) 377-9431**

I, **Tamara Sue Crews** certify under penalty of perjury that the amended forms herein are accurate and true to the best of my knowledge and belief.

Date: **October 16, 2012**

/s/ Tamara Sue Crews

United States Bankruptcy Court
Eastern District of Virginia

In re Tamara Sue Crews

Debtor(s)

Case No. 12-31264
Chapter 13

TO:

Midlothian Medical Care
3000 Watercove Road
Midlothian, VA 23112

Virginia Surgical Associates
417 Libbie Ave.
Richmond, VA 23226

**NOTICE TO
CREDITOR(S) (RE AMENDMENT)**

NOTICE IS HEREBY GIVEN that an amendment to the above-captioned debtor's schedules has been filed

- ☒ adding you as a creditor,
☐ deleting you as a creditor,
☐ correcting your address

A copy of the amendment is forwarded to you together with this notice.

[If amendment is adding creditor(s)] NOTICE IS FURTHER GIVEN that also forwarded to you together with this notice is a copy of the notice of the meeting of creditors called by the United States Trustee pursuant to Federal Rule of Bankruptcy Procedure 2003, giving the particulars of the case and stating the last date for the filing of claims (*if any was given*), for filing complaints objecting to the discharge and complaints to determine the dischargeability of certain debts; a copy of the discharge of the debtor, *if one has been entered*, a subsequent notice to file claims, *if one has been issued*, and any other filed document affecting the rights of the added creditor(s).

Tamara Sue Crews

Date: October 16, 2012

By /s/ Nnika E. White, Esq.

Attorney for Debtor [or *Pro Se* Debtor]

State Bar No.: **47012**

Address: **The Law Offices of White & Associates, PC
2505 Pocoshock Place
Suite 301
Richmond, VA 23235**

Telephone No.: **(804) 377-9431**

CERTIFICATION

I certify that on October 16, 2012, I served a copy of the foregoing notice on the United States Trustee, any appointed trustee, and any and all entities affected by the amendment pursuant to Local Bankruptcy Rule 1009-1(A).

/s/ Nnika E. White, Esq.

Nnika E. White, Esq. 47012

Attorney for Debtor [or *Pro Se* Debtor]

**United States Bankruptcy Court
Eastern District of Virginia**

In re **Tamara Sue Crews**

Debtor(s)

Case No. **12-31264**
Chapter **13**

**AMENDED
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I certify under penalty of perjury that the foregoing is true and correct.

Date **October 16, 2012**

Signature **/s/ Tamara Sue Crews**
Tamara Sue Crews
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571